TRAVEL ITINERARY

This form must be completed and returned to the Sport Club Office 7 days prior to any club related travel.

Club: ____________________________ Date Submitted: __________________________

Event: ____________________________ Date(s) of event: __________________________

Destination: ____________________________ (School) ____________________________ (City)

Trip Contact: ____________________________ Trip Phone: ____________________________

Departure date & time from Merced: Month: _______ Day: _______ Time: _______

Return date & time to Merced: Month: _______ Day: _______ Time: _______

Mode of Transportation:

_____ University Vehicle Drivers: ____________________________

_____ Individual Vehicle Drivers: ____________________________

_____ Other _____________ Drivers: ____________________________

_____ Airlines _____________________-_____________________

________ (Name) (Departure City) (Flight # s)

Driving route (attach map): __________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

Lodging Arrangements:

_____ Hotel: Name_______________________ Phone: (____)_____________________

______ Number of Nights Dates of Stay: __________________________

_____ Private Home: Contact ______________________ Phone: (____)_____________________

______ Number of Nights Dates of Stay: __________________________

(OVER)
Member’s traveling to event:

Contact Person Statement:
All of the information supplied above is accurate to the best of my knowledge. I understand and have informed all club members of their responsibilities while participating and competing in the event and on this trip. I pledge to exercise appropriate care and prudence while representing the club and obey all laws in order to assure club members and my safety.

Submitted By: ___________________________  Phone Number: (_____)________________

Approved: ______  Date: ______  Copy to Club: ______  Copy to File: ______

Travel Checklist

This is a checklist of things to consider when making travel arrangements:

Who is traveling? _____ Submit Travel Itinerary & Online form

How will we get there?
University Vehicles _____ Did you submit a request for vehicles?
Member’s vehicles _____ Are licenses/insurance submitted for all drivers?
_____ Are vehicles reliable and insured?

Travel Binder _____ Check out Travel Binder from Sport Club Office

Where will we stay?
Hotel/motel _____ Are the reservations made and confirmed?
_____ Get receipt and bring to Campus Recreation Office upon return

Important phone #’s
Campus Recreation Office (209)228-7732
David’s Cell Phone (209)224-7555
Allison’s Cell Phone (209)658-4032